

STATE OF HAWAII
Department of Accounting and General Services
Division of Public Works

MONTHLY ESTIMATEFOR THE MONTH OF SEPTEMBER 2012Date: September 20, 2012CONTRACTOR: Commercial Electric, Inc.ADDRESS: 1010 Pa'apu StreetContract No. 60030 [☒]City, State ZIP: Honolulu, Hawaii 96819DAGS Job No. 12-20-2642PROJECT TITLE: Hawaii State Hospital Various Locations, Replace Transformers and Switchgear**CONTRACT**Basic Contract Amount \$ 760,000.00 ✓**FOR INSPECTION BRANCH USE**[☐] SUBMITTAL REGISTER [☐] COMMENCEMENT REQUIREMENTS**DUE MONTHLY:**[☐] PROJECT SCHEDULE - INITIAL & ONGOING[☐] DAILY REPORTS[☐] PAYROLL AFFIDAVITS**MONTHLY ESTIMATE CHECKLIST**[☒] CONTRACT NUMBER[☒] PROJECT NAME & LOCATION[☒] ALL SIGNATURES**CHANGE ORDERS**Total \$ 125,725.00 ✓Adjusted Contract Amount \$ 885,725.00 ✓**WORK ACCOMPLISHED****Basic Contract****Change Order****Total**Completed to Date 54.50% \$ 414,200.00 ✓ 2.01% \$ 2,530.00 ✓ \$ 416,730.00 ✓

Retained	REDUCED [<input type="checkbox"/>]	\$ <u>22,480.00</u> ✓	\$ <u>126.00</u>	\$ <u>22,606.00</u> ✓
Amount Subject to Payment		\$ <u>391,720.00</u> ✓	\$ <u>2,404.00</u>	\$ <u>394,124.00</u>
Payments to Date		\$ <u>357,520.00</u> ✓	\$ <u>2,404.00</u>	\$ <u>359,924.00</u>
Payments Now Due		\$ <u>34,200.00</u> ✓	\$ <u>-</u>	\$ <u>34,200.00</u> ✓

Payment No. 7

INVOICE NO.: 0347-11

1. Computed and Checked by:

3. Recommended: [Signature] Project Inspector or EngineerDate: 10/5/124. Recommended: [Signature] Area Engineer/ArchitectDate: 10/5/125. Approved: [Signature] Branch Chief or District EngineerDate: OCT - 8 2012

The Public Works Administrator certifies that change orders have been issued and the work performed.

State Public Works Administrator

Date: OCT - 9 2012

2. I certify that the above bill is correct, just, that payment has not been received, and all payroll affidavits have been submitted, are current, or proper deductive exclusions have been made to this request.

Commercial Electric, Inc.

Name of Contractor

[Signature]
MARK W. TEVES, JR.
PRESIDENT

SEP 20 2012

BASIC CONTRACT - PRIME & SUB CONTRACTOR RETAINAGE CALCULATION

STATE OF HAWAII
Department of Accounting and General Services
Division of Public Works

For the Month of: SEPTEMBER 2012

CONTRACTOR:	Commercial Electric, Inc.	Contract No.: 60030
PROJECT TITLE:	Hawaii State Hospital Various Locations, Replace Transl	DAGS Job No.: 12-20-2642

CLOSED								
	<u>PRIME CONTRACTOR</u>	<u>TRADE</u>	<u>LICENSE NO.</u>	<u>BASIC CONTRACT AMOUNT</u>	<u>COMPL. TO DATE</u>	<u>% Cmpl</u>	<u>RETN %</u>	<u>CONTRACT AMOUNT RETAINED</u>
	Commercial Electric, Inc.	General Contractor	C-07215	\$760,000	\$414,200	54.50%	5%	\$20,710

	SUBCONTRACTOR	TRADE	LICENSE NO.	BASIC SUB-CONTRACT AMOUNT	COMPL. TO DATE	% Cmpl	RETN %	SUB- CONTRACT AMOUNT RETAINED
	Quality General	Concrete/Masonry	ABC-13362	\$35,400	\$35,400	100.00%	5%	\$1,770
						#DIV/0!	10%	\$0
						#DIV/0!	10%	\$0
						#DIV/0!	10%	\$0
						#DIV/0!	10%	\$0
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						#DIV/0!	10%	\$0
						#DIV/0!	10%	\$0
						#DIV/0!	10%	\$0
	Total Retained from Subs							\$1,770 B

BASIC CONTRACT - RETAINED FROM PRIME AND SUBS (A+B)	\$22,480
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I certify that the above retentions are correct for this request.

COMMERCIAL ELECTRIC, INC.

Name of Contractor

NICK W. TEVES, JR., PRESIDENT

By Signature

SEP 20 2012

Date _____

Checked/Verified by:

Initial - Project Inspector or Engineer

NOTE:
Columnar totals shall be equal in dollar value to that on
the Monthly Estimate Sheet

CHANGE ORDER - PRIME & SUB CONTRACTOR RETAINAGE CALCULATION

STATE OF HAWAII
Department of Accounting and General Services
Division of Public Works

For the Month of: SEPTEMBER 2012

CONTRACTOR:	Commercial Electric, Inc.	Contract No.: 60030
PROJECT TITLE:	Hawaii State Hospital Various Locations, Replace Tran	DAGS Job No.: 12-20-2642

CLOSED								CHANGE ORDER AMOUNT RETAINED
	PRIME CONTRACTOR	TRADE	LICENSE NO.	CHANGE ORDER AMOUNT	COMPL. TO DATE	% Cmpl	RETN %	
	Commercial Electric, Inc.	General Contractor	ABC-23456	\$125,725	\$2,530	2.01%	5%	\$126 A

	SUBCONTRACTOR	TRADE	LICENSE NO.	CHANGE ORDER SUB AMOUNT	COMPL. TO DATE	% CMPL	RETN %	CHANGE ORDER SUB AMOUNT RETAINED
	Sub A	Sealer	C-56789	\$0	\$0	#DIV/0!	10%	\$0
	Sub B	Landscape	C-7865	\$0	\$0	#DIV/0!	10%	\$0
						#DIV/0!	10%	\$0
						#DIV/0!	10%	\$0
						#DIV/0!	10%	\$0
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						#DIV/0!	10%	\$0
						#DIV/0!	10%	\$0
						#DIV/0!	10%	\$0
	Total Retained from Subs							\$0

CHANGE ORDER CONTRACT - RETAINED FROM PRIME AND SUBS (A+B)	\$126
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I certify that the above retentions are correct for this request.

COMMERCIAL ELECTRIC, INC.

Name of Contractor

Checked/Verified by:

✓

Initial - Project Inspector or Engineer

By Signature:

NICK W. TENG, JR.

Date _____

SEP 20 2012

NOTE: **PRESIDENT**
Columnar totals shall be equal in dollar value to that on
the Monthly Estimate Sheet

STATE OF HAWAII
DEPARTMENT OF ACCOUNTING AND GENERAL SERVICES
DIVISION OF PUBLIC WORKS
Monthly Payment Slip

PAYMENT NO.: 7

PROJECT TITLE: HAWAII STATE HOSPITAL - VARIOUS LOCATIONS, REPLACE TRANSFORMERS & SWITCHGEAR

BILLING MONTH: September-12

DAGS JOB NO.: 1 2-20-2642

CONTRACT NO.: 60030

CONTRACTOR: COMMERCIAL ELECTRIC INC.

VENDOR CODE: 270400

Original Contract Payment Suffix: 1, 3

<u>Suffix</u>	<u>Fund Symbol</u>	<u>Amount Earned</u>	<u>Retainage</u>	<u>Amount Due</u>
03	B09-408M	\$36,000.00	\$1,800.00	\$34,200.00
Totals:		\$36,000.00	\$1,800.00	\$34,200.00

Change Order Payment Suffix: 2, 4, 5

<u>Suffix</u>	<u>Fund Symbol</u>	<u>Amount Earned</u>	<u>Retainage</u>	<u>Amount Due</u>
	B09-408M	\$0.00	\$0.00	\$0.00
Totals:				

Grand Total:	\$36,000.00	\$1,800.00	\$34,200.00
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Verified By Y. Xue

DATE 10/10/2012

(This Section for Administrative Services Office Use Only)

Vendor Code 270400

Cost Code 3A1

Voucher No. 10114N35

Verified By Per OCT 17 2012